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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself			
			About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.		Antonio First name  V Middle name  Cole Last name and Suffix (Sr., Jr., II, III)	-	Latoya First name  D Middle name  Cole Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ude your married or den names.			Latoya D Porchia Latoya D Porchia-Cole
3.	you num Indi	y the last 4 digits of r Social Security ober or federal vidual Taxpayer otification number	xxx-xx-8083		xxx-xx-0919

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Debtor 1 Antonio V Cole
Debtor 2 Latoya D Cole

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):  I have not used any business name or EINs.  Business name(s)  EINs				
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs					
5.	Where you live	219 E. Greenview Ave. Machesney Park, IL 61115	If Debtor 2 lives at a different address:				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
		Winnebago County	County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
6.	Why you are choosing this district to file for bankruptcy  Over the last 180 days before filing this per I have lived in this district longer than in an other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)		Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)				

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Det	otor 2 Latoya D Cole					Case number (if known)		
Par	t 2: Tell the Court About	Your Bank	ruptcy Ca	ase				
7.	The chapter of the Bankruptcy Code you are				h, see <i>Notice Required by</i> 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for Bankru e box.	ptcy	
	choosing to file under	■ Chapt	ter 7					
		☐ Chapt	ter 11					
		☐ Chapt	ter 12					
		☐ Chapt	ter 13					
8.	How you will pay the fee	abo ord	will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more deta bout how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or more der. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check we pre-printed address.					
		☐ Ine	ed to pa	y the fee in installme ee in Installments (Offic	nts. If you choose this option	on, sign and attach the Application for Individuals to	o Pay	
		☐ I re	quest that	at my fee be waived ('quired to, waive your fe	You may request this optioe, and may do so only if yo	n only if you are filing for Chapter 7. By law, a judge our income is less than 150% of the official poverty n installments). If you choose this option, you must	line that	
						cial Form 103B) and file it with your petition.		
9.	Have you filed for	■ No.						
	bankruptcy within the last 8 years?	☐ Yes.						
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor	-		Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ No.	Go to	line 12.				
	. Joseph Committee Committ	☐ Yes.	Has yo	our landlord obtained a	n eviction judgment agains	st you and do you want to stay in your residence?		
				No. Go to line 12.				
				Yes. Fill out <i>Initial Sta</i> bankruptcy petition.	atement About an Eviction	Judgment Against You (Form 101A) and file it with	this	

Antonio V Cole

Debtor 1

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Debtor 1 Antonio V Cole

Deb	tor 2 Latoya D Cole				Case number (if known)		
Par	Report About Any Bu	ısinesses	You Own	as a Sole Proprie	tor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of bus	siness		
	A sole proprietorship is a			of business, if any			
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.						
	If you have more than one Sumber, Street, City, State & ZIP Code sole proprietorship, use a separate sheet and attach						
	it to this petition.		Check	the appropriate bo	ox to describe your business:		
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	I Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as d	defined in 11 U.S.C. § 101(53A))		
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))		
				None of the above	е		
13.	<b>Chapter 11 of the</b> deadlines. If you indicate that you are a small business debtor, you must attach your relationship.				court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure		
	For a definition of small	■ No.	I am n	ot filing under Char	oter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.		11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	4: Report if You Own or	Have Any	Hazardo	us Property or An	y Property That Needs Immediate Attention		
	Do you own or have any	■ No.			, <del>,</del>		
	property that poses or is alleged to pose a threat	☐ Yes.					
	of imminent and	□ 1es.	What is t	he hazard?			
	identifiable hazard to public health or safety?						
	Or do you own any		If immed	iate attention is			
	property that needs immediate attention?			why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			the property?			
					Number, Street, City, State & Zip Code		

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Debtor 1 Debtor 2 Latoya D Cole Case number (if known)

#### Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

**Explain Your Efforts to Receive a Briefing About Credit Counseling** 

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-81711 Doc 1 Filed 07/24/17 Entered 07/24/17 15:09:40 Desc Main Document Page 6 of 61

	tor 1 Antonio V Cole tor 2 Latoya D Cole		Document		_	umber (if know	n)	
Part	6: Answer These Quest	ions for Re	eporting Purposes					
	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incuindividual primarily for a personal, family, or household purpose."					
			Yes. Go to line 17.					
		16b.	Are your debts primarily business money for a business or investmen					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe the	at are not consu	mer debts or bu	siness debts	: 	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.		am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?				
	administrative expenses are paid that funds will		■ No					
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99		□ 1,000-5,000 □ 5001-10,000			] 25,001-50,000 ] 50,001-100,000	
		□ 100-199 □ 200-999		☐ 10,001-25,000 ☐ More than 100,0			More than100,000	
19.	How much do you estimate your assets to	□ \$0 - \$5 □ \$50.00	50,000 01 - \$100,000	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million			\$500,000,001 - \$1 billion \$1,000,000,001 - \$10 billion	
	be worth?	<b>\$100,0</b>	■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		1 - \$100 million 01 - \$500 million		3 \$10,000,000,001 - \$50 billion 3 More than \$50 billion	
20.	How much do you estimate your liabilities	□ \$0 - \$5 □ \$50.00	50,000 01 - \$100,000	□ \$1,000,001 □ \$10,000,00			\$500,000,001 - \$1 billion \$1,000,000,001 - \$10 billion	
	to be?	<b>\$100,0</b>	001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million			\$10,000,000,001 - \$50 billion  More than \$50 billion	
Part	:7: Sign Below							
For	you	I have exa	amined this petition, and I declare u	under penalty of p	perjury that the i	information p	provided is true and correct.	
			hosen to file under Chapter 7, I amates Code. I understand the relief a					
			ney represents me and I did not pa t, I have obtained and read the noti				orney to help me fill out this	
		•	relief in accordance with the chapte	•		•	·	
		bankrupto and 3571			onment for up to	20 years, or	rty by fraud in connection with a r both. 18 U.S.C. §§ 152, 1341, 1519,	
		/s/ Antonio	nio V Cole		/s/ Latoya D			
			of Debtor 1		Signature of D			
		Executed	on July 24, 2017 MM / DD / YYYY		Executed on	July 24, 2		

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<b>-</b>	A	Document	Page 7 of 61				
Debtor 1 Debtor 2	Antonio V Cole Latoya D Cole		Case number (if known)				
•	attorney, if you are ed by one	under Chapter 7, 11, 12, or 13 of title 11, Unit	ed States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)			
	not represented by ey, you do not need a page.	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.	s, certify that I have no know	rledge after an inquiry that the information in the			
		/s/ Dennis L Leahy	Date	July 24, 2017			
		Signature of Attorney for Debtor		MM / DD / YYYY			
		Dennis L Leahy Printed name			-		
		Dennis L Leahy Firm name			-		
		One Court Place Suite 203 Rockford, IL 61101 Number, Street, City, State & ZIP Code			-		

Email address

attyleahy@yahoo.com

Contact phone **815 964-9600** 

**1599046**Bar number & State

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		Docume	HIL Paue o UI OI	
Fill in this infor	mation to identify your	case:		
Debtor 1	Antonio V Cole			
	First Name	Middle Name	Last Name	
Debtor 2	Latoya D Cole			
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number _				

☐ Check if this is an amended filing

### Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

1. Part	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$ \$ \$	
Part	1c. Copy line 63, Total of all property on Schedule A/B		
Part		\$	100,650.00
Part	2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	98,000.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	1,419.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	33,158.00
	Your total liabilities	\$	132,577.00
Part	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,474.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,195.00
Part	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur other sch	nedules.
7.	■ Yes What kind of debt do you have?		

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

4,589.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	<b>Total claim</b>	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	1,419.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	1,419.00

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Fill i	n this information to	identify	your case and t						
Debt	or 1 Anto	nio V C	ole						
<b>5</b>	First Na			e Name		Last Name			
Debt (Spous	or 2 Lato: se, if filing) First Na	ya D Co ame		e Name		Last Name			
Unite	ed States Bankruptcy	Court for	the: NORTHER	RN DISTI	RICT OF ILLIN	OIS			
Case	e number								☐ Check if this is an amended filing
_	icial Form 10 hedule A/I		-						40445
						n asset fits in more than o			12/15
hink i nform	it fits best. Be as comp nation. If more space is er every question.	olete and needed,	accurate as possib attach a separate s	le. If two heet to th	married people nis form. On the	are filing together, both a top of any additional pag	re equally resp	onsible for su	pplying correct
_	No. Go to Part 2. Yes. Where is the prope	erty?							
1.1				What	is the property	? Check all that apply			
219 E. Greenview  Street address, if available, or other description		. =	Duplex or multi-unit building the amou Creditors		the amoun	deduct secured claims or exemptions. Put ount of any secured claims on Schedule D: ors Who Have Claims Secured by Property.			
	Machesney Park	IL	61115-0000		Manufactured of Land	or mobile home	Current va		Current value of the portion you own?
-	City	State	ZIP Code		Investment pro	perty		75,000.00	\$75,000.00
					Timeshare Other		_ (such as f	ee simple, ten	our ownership interest ancy by the entireties, or
		Will has an interest in the property. Oneck one			a life estat	e), if known. nip			
=	Winnebago				Debtor 2 only				
	County				Debtor 1 and D At least one of	ebtor 2 only the debtors and another		k if this is com	munity property

pages you have attached for Part 1. Write that number here.......>>

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for

\$75,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

**Rockford Area Habitat for Humanity** 

property identification number:

Other information you wish to add about this item, such as local

subject to first mortgage of Alpine Bank, and second mortgage of

Official Form 106A/B Schedule A/B: Property page 1

Debte	or 2 <u>L</u>	atoya D Cole			Case number (if known)			
3. <b>Ca</b>	rs, vans,	trucks, tractor	s, sport utility ve	hicles, motorcycles				
	No							
_	162							
3.1	Make:	Saturn		Who has an interest in the property? Check one			ms or exemptions. Put	
0.1	Model:	Outlook		Debtor 1 only			claims on Schedule D: s Secured by Property.	
	Year:	2008		Debtor 2 only				
	Approximate mileage: 130,000		130,000	■ Debtor 1 and Debtor 2 only	Current value of entire property?	ine	Current value of the portion you own?	
	Other inf	formation:		☐ At least one of the debtors and another				
	subject Elite M	t to security i lotors	nterest of	☐ Check if this is community property (see instructions)	\$10,000	.00	\$10,000.00	
2.2	Make:	Chevy		Who has an interest in the property? Check one	Do not deduct sec	ured clai	ms or exemptions. Put	
3.2	Model:	Equinox		Debtor 1 only	the amount of any	secured	red claims on Schedule D:	
	Year:	2010		Debtor 2 only		/ho Have Claims Secured by Proper		
		nate mileage:	95,000	■ Debtor 1 and Debtor 2 only	Current value of entire property?	the	Current value of the portion you own?	
		formation:	<u> </u>	☐ At least one of the debtors and another				
		t to security i	nterest of		<b>\$7.000</b>		47.000.00	
	Elite M	lotors		Check if this is community property (see instructions)	\$7,000	.00	\$7,000.00	
□ <b>`</b>	Yes							
				n for all of your entries from Part 2, includin that number here			\$17,000.00	
Dort 2	Dogori	ho Vour Boroonal	l and Household Ite	nma				
				terest in any of the following items?		<b>pc</b> Do	urrent value of the ortion you own? o not deduct secured aims or exemptions.	
Ex	<i>amples:</i> No	,		, china, kitchenware			, , , , , , , , , , , , , , , , , , , ,	
	Yes. De	scribe						
		ŀ	nousehold good	ds and furnishings		_	\$1,500.00	
Ex	No	Televisions and		eo, stereo, and digital equipment; computers, predia players, games	rinters, scanners; music c	ollectior	ns; electronic devices	
		1	ΓV, computer			_	\$750.00	

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

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Debtor 1 Debtor 2	Antonio V Cole Latoya D Cole			Case number	(if known)
☐ Yes.	. Describe				
Examp	musical instruments	c, exercise, and c	other hobby equipment;	picycles, pool tables, golf clubs, skis	; canoes and kayaks; carpentry tools;
	. Describe				
■ No	pples: Pistols, rifles, shoto	guns, ammunitior	n, and related equipment		
□ No	es oples: Everyday clothes, f . Describe	urs, leather coats	s, designer wear, shoes,	accessories	
	Debt	tors' clothing			\$500.00
■ No □ Yes.  13. Non-fa Exam ■ No □ Yes.  14. Any o □ Yes.  15. Add for F	. Describe  arm animals  aples: Dogs, cats, birds, h  Describe  ther personal and hous  Give specific information	ehold items you on f your entries fr	u did not already list, in om Part 3, including a	ncluding any health aids you did n	not list
	wn or have any legal or		est in any of the follow	ing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	ples: Money you have in			osit box, and on hand when you file y	our petition
Exam			I accounts; certificates of counts with the same ins		okerage houses, and other similar
. 30.					

Official Form 106A/B Schedule A/B: Property page 3

**Bank Corp** 

17.1.

\$100.00

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	ebtor 1 ebtor 2	Antonio V Cole Latoya D Cole	Document	Case number (if known)	
18.	_Exam <sub>l</sub>	s, mutual funds, or publicly traded stooples: Bond funds, investment accounts w		ey market accounts	
	■ No □ Yes	Institution or is	ssuer name:		
19.	Non-p		ncorporated and uninco	rporated businesses, including an interest	in an LLC, partnership, and
	■ No				
	☐ Yes.	Give specific information about them Name of entity:		% of ownership:	
	Negot	nment and corporate bonds and other iable instruments include personal check regotiable instruments are those you can	s, cashiers' checks, pron	nissory notes, and money orders.	
		Give specific information about them Issuer name:			
21.		ment or pension accounts oles: Interests in IRA, ERISA, Keogh, 40°	1(k), 403(b), thrift savings	accounts, or other pension or profit-sharing pl	ans
	■ Yes.	List each account separately.  Type of account:	Institution na	ame:	
			403B		\$5,000.00
			<u>401k</u>		\$800.00
22.	Your s Examp	ty deposits and prepayments share of all unused deposits you have maples: Agreements with landlords, prepaid		nue service or use from a company tric, gas, water), telecommunications companie	es, or others
	■ No □ Yes.		Institution na	ame or individual:	
23.	_	ties (A contract for a periodic payment of	money to you, either for	life or for a number of years)	
	■ No □ Yes	Issuer name and descript	ion.		
24.		ts in an education IRA, in an account C. §§ 530(b)(1), 529A(b), and 529(b)(1).		gram, or under a qualified state tuition prog	ram.
	☐ Yes	Institution name and desc	cription. Separately file the	e records of any interests.11 U.S.C. § 521(c):	
	■ No		erty (other than anything	g listed in line 1), and rights or powers exerc	cisable for your benefit
		Give specific information about them			
		<ul><li>s, copyrights, trademarks, trade secreples: Internet domain names, websites, p</li></ul>			
	☐ Yes.	Give specific information about them			
		ses, franchises, and other general inta ples: Building permits, exclusive licenses		holdings, liquor licenses, professional licenses	3
		Give specific information about them			
M	oney or	property owed to you?			Current value of the portion you own?  Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 4

claims or exemptions.

Case 17-81711 Doc 1 Filed 07/24/17 Entered 07/24/17 15:09:40 Desc Main Document Page 14 of 61 Debtor 1 **Antonio V Cole** Debtor 2 Latoya D Cole Case number (if known) 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No  $\square$  Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance  $\hfill\square$  Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$5,900.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7.

☐ Yes. Go to line 47.

Schedule A/B: Property

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

Official Form 106A/B

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Debtor 1		Ü		
Debtor 2	2 Latoya D Cole		Case number (if known)	
	you have other property of any kind you did not already list? amples: Season tickets, country club membership			
■ No	)			
☐ Ye	es. Give specific information			
54. <b>Ad</b>	ld the dollar value of all of your entries from Part 7. Write tha	at number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. <b>Pa</b> i	rt 1: Total real estate, line 2			\$75,000.00
56. <b>Pa</b> i	rt 2: Total vehicles, line 5	\$17,000.00	_	
57. <b>Pa</b> i	rt 3: Total personal and household items, line 15	\$2,750.00		
58. <b>Pa</b> i	rt 4: Total financial assets, line 36	\$5,900.00		
59. <b>Pa</b> i	rt 5: Total business-related property, line 45	\$0.00		
60. <b>Pa</b> i	rt 6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>Pa</b>	rt 7: Total other property not listed, line 54 +	\$0.00		
62. <b>To</b>	tal personal property. Add lines 56 through 61	\$25,650.00	Copy personal property total	\$25,650.00
63. <b>To</b> t	tal of all property on Schedule A/B. Add line 55 + line 62			\$100 650 00

Official Form 106A/B Schedule A/B: Property page 6

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		Docume	IIL I AUC TO OI OT		
Fill in this infor	mation to identify your	case:			
Debtor 1	Antonio V Cole				
	First Name	Middle Name	Last Name		
Debtor 2	Latoya D Cole				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				'	Check if this is an amended filing

### Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt
---

1.	Which set of exemptions are	you claiming?	Check one only	, even if	your spouse is filing	g with yo	эu.
----	-----------------------------	---------------	----------------	-----------	-----------------------	-----------	-----

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from			Specific laws that allow exemption	
	Schedule A/B		,		
219 E. Greenview Machesney Park, IL 61115 Winnebago County	\$75,000.00		\$15,000.00	735 ILCS 5/12-901	
subject to first mortgage of Alpine Bank, and second mortgage of Rockford Area Habitat for Humanity Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit		
2008 Saturn Outlook 130,000 miles subject to security interest of Elite	\$10,000.00		\$2,400.00	735 ILCS 5/12-1001(c)	
Motors Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit		
2010 Chevy Equinox 95,000 miles subject to security interest of Elite	\$7,000.00		\$2,400.00	735 ILCS 5/12-1001(c)	
Motors Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit		
household goods and furnishings Line from Schedule A/B: 6.1	\$1,500.00		\$1,500.00	735 ILCS 5/12-1001(b)	
Ellio IIolii Goriodalo 24 B. G.1			100% of fair market value, up to any applicable statutory limit		
TV, computer Line from Schedule A/B: 7.1	\$750.00		\$750.00	735 ILCS 5/12-1001(b)	
Line from <i>Schedule PVD</i> . 1.1			100% of fair market value, up to any applicable statutory limit		

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Debtor 2 Latoya D Cole Case number (if known) Brief description of the property and line on Schedule A/B that lists this property Current value of the Amount of the exemption you claim Specific laws that allow exemption portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Debtors' clothing** 735 ILCS 5/12-1001(a) \$500.00 \$500.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit **Bank Corp** 735 ILCS 5/12-1001(b) \$100.00 \$100.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit 403B 735 ILCS 5/12-1006 \$5,000.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 401k 735 ILCS 5/12-1006 \$800.00 Line from Schedule A/B: 21.2 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Yes

Debtor 1

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		Document Page	18 of 61		
Fill in this in	nformation to identify you	r case:			
Debtor 1	Antonio V Colo				
Debior 1	Antonio V Cole First Name	Middle Name Last Nam	ie	-	
Debtor 2	Latoya D Cole				
(Spouse if, filing)		Middle Name Last Nam	ie	-	
	D I . O . ( . I	NODTHERN DIOTRICT OF HILINOIS			
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		_	
Case number	2r				
(if known)				☐ Check	if this is an
					led filing
					3
Official F	orm 106D				
		Who Have Claims Secu	rad by Proport		40/45
Scriedo	ile D. Creditors	WIIO Have Claims Secu	red by Propert	<u>.y</u>	12/15
Be as complet	te and accurate as possible. I	f two married people are filing together, both a	re equally responsible for s	upplying correct informa	tion. If more space
		out, number the entries, and attach it to this for	m. On the top of any additio	nal pages, write your na	me and case
number (if kno	•				
_ •	litors have claims secured by	, , , ,			
☐ No. C	Check this box and submit the	nis form to the court with your other schedule	es. You have nothing else	to report on this form.	
Yes.	Fill in all of the information b	pelow.			
Part 1: Li	ist All Secured Claims				
			. Column A	Column B	Column C
		nore than one secured claim, list the creditor sepa	rately	Value of collateral	Unsecured
for each claim. If more than one creditor has much as possible, list the claims in alphabeti			Do not deduct the	that supports this	portion
			value of collateral.	claim	If any
	e Bank & Trust Co	Describe the property that secures the claim:	\$43,000.00	\$75,000.00	\$0.00
Creditor's	s name	219 E. Greenview Ave			
		Machesney Park IL 61115			
4700	N Alpina Dal	As of the date you file, the claim is: Check all th	l at		
	N Alpine Rd ford, IL 61107	apply.			
		Contingent			
Number,	Street, City, State & Zip Code	Unliquidated			
W/h = (1	ha dahun o	Disputed			
_	he debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 o	only	An agreement you made (such as mortgage	or secured		
Debtor 2 o	•	car loan)			
Debtor 1 a	and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	en)		
At least on	e of the debtors and another	☐ Judgment lien from a lawsuit			
	his claim relates to a	Other (including a right to offset) mortga	ge against residence		
communi	ity debt				
Date debt wa	s incurred	Last 4 digits of account number 82	01		
			····		
2.2 Elita	Motoro	Describe the property that secures the claims	\$12,000,00	\$10 000 00	\$2,000.00
2.2 Elite I	Motors s Name	Describe the property that secures the claim:	\$12,000.00	\$10,000.00	\$2,000.00
oroano.	- Namo	2008 Saturn Outlook			
3036	Kishwaukee St	As of the date you file, the claim is: Check all the	at		
	ford, IL 61109	apply.			
-		Contingent			
number,	Street, City, State & Zip Code	Unliquidated			
Who owes H	he debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
		_			
Debtor 1 o	-	An agreement you made (such as mortgage	or secured		
Debtor 2 o	•	car loan)			
	and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lie	en)		
	e of the debtors and another	☐ Judgment lien from a lawsuit			
	his claim relates to a	Other (including a right to offset)			
communi	ity debt				
Date debt wa	s incurred	Last 4 digits of account number			

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Debtor 1 Antonio V Cole	C	Case number (if know)			
First Name Middle Debtor 2 Latova D Cole	Name Last Name	_			
Debtor 2 Latoya D Cole First Name Middle	Name Last Name				
2.3 Elite Motors	Describe the property that secures the claim:	\$15,000.00	\$7,000.00	\$8,000.00	
Creditor's Name	2010 Chevy Equinox	,	<u>, , , , , , , , , , , , , , , , , , , </u>	<b>,</b> , ,	
3036 Kishwaukee St Rockford, IL 61109 Number, Street, City, State & Zip Code	As of the date you file, the claim is: Check all that apply.				
Number, Street, City, State & ZIP Code	☐ Unliquidated ☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or secur car loan)	red			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the debtors and another☐ Check if this claim relates to a community debt	☐ Judgment lien from a lawsuit☐ Other (including a right to offset)				
Date debt was incurred	Last 4 digits of account number				
Rockford Area Habitat for Humanity	Describe the property that secures the claim:	\$28,000.00	\$75,000.00	\$0.00	
Creditor's Name	219 E. Greenview Ave, Machesney Park, IL 61115				
5183 Harlem Rd Loves Park, IL 61111	As of the date you file, the claim is: Check all that apply.  Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	<ul> <li>An agreement you made (such as mortgage or secur car loan)</li> </ul>	red			
Debtor 2 only					
<ul><li>□ Debtor 1 and Debtor 2 only</li><li>□ At least one of the debtors and another</li></ul>	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)				
Date debt was incurred	Last 4 digits of account number				
	Column A on this page. Write that number here:	\$98,000.00			
If this is the last page of your form, ad	d the dollar value totals from all pages.	\$98,000.00			

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Page 20 of 61 Document Fill in this information to identify your case: Debtor 1 **Antonio V Cole** Middle Name Last Name First Name Debtor 2 Latoya D Cole (Spouse if, filing) Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known) Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? ☐ No. Go to Part 2 List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim** Priority Nonpriority amount amount 2.1 State of Indiana Last 4 digits of account number \$1,419.00 Unknown Unknown Priority Creditor's Name 2012 Department of Revenue When was the debt incurred? **Bankruptcy Section--MS 108** 100 N Senate Ave. N240 Indianapolis, IN 46204 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only □ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ■ No ☐ Other. Specify ☐ Yes Tax Lien Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes.

List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.lf you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

**Total claim** 

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Debtor	<sup>1</sup> Latoya D Cole	Case number (if know)			
4.1	5 Points Rentals	Last 4 digits of account number	\$3,942.00		
	Nonpriority Creditor's Name Mutual Management Serv 7177 Crimson Ridge Dr. #10 Rockford, IL 61107	When was the debt incurred?			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify rent			
4.2	5 Points Rentals	Last 4 digits of account number	\$0.00		
	Nonpriority Creditor's Name 4040 Charles Street #LL Rockford, IL 61108	When was the debt incurred?			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify notice only			
4.3	5 Points Rentals	Last 4 digits of account number	\$0.00		
	Nonpriority Creditor's Name Alberto Altamore 308 W State St. #420	When was the debt incurred?			
	Rockford, IL 61101  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	□ Debts to pension or profit-sharing plans, and other similar debts			
	<u> </u>				
	☐ Yes	Other. Specify notice only			

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	Antonio V Cole Latoya D Cole	Case number (if know)			
4.4	Best Property Management	Last 4 digits of account number	\$1,000.00		
	Nonpriority Creditor's Name  James C. Thompson  Altamore & Associates  308 W State St. #420	When was the debt incurred?	<b>V</b> 1,000.00		
_	Rockford, IL 61101  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify rent			
4.5	Best Property Management Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00		
	James C. Thompson 515 N Court St. Rockford, IL 61103	When was the debt incurred?			
_	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify notice only			
	CBO/CV Nonpriority Creditor's Name	Last 4 digits of account number	\$11.00		
	Convergent Healthcare Recovery 121 NE Jefferson St. #100 Peoria, IL 61602	When was the debt incurred?			
_	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	□ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts			
	□Yes	Other. Specify medical			

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	1 Antonio V Cole 2 Latoya D Cole	Case number (if know)		
4.7	Citizens Finance	Last 4 digits of account number	\$5,402.00	
	Nonpriority Creditor's Name Barrick Switzer Long Balsley & VanEvera 6833 Stalter Dr. Rockford, IL 61108	When was the debt incurred?	<b>V</b> 2, 2	
-	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify deficiency from repossession of vehicle		
4.8	Comcast	Last 4 digits of account number	\$112.00	
	Nonpriority Creditor's Name Convergent Outsourcing, Inc. PO Box 9004	When was the debt incurred?		
-	Renton, WA 98057  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify utility		
4.9	Comcast Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00	
	4450 Kishwaukee Street Rockford, IL 61109	When was the debt incurred?		
-	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify notice only		

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Debtor 1 Antonio V Cole

Debtor 2 Latoya D Cole		Case number (if know)		
4.1	Commonwealth Edison	Last 4 digits of account number	\$1,106.00	
	Nonpriority Creditor's Name CCI/Contract Callers Inc. PO Box 3000	When was the debt incurred?		
	Augusta, GA 30903  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	Other. Specify utility		
4.1	Commonwealth Edicon		¢0.00	
1	Commonwealth Edison  Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00	
	Attn: Bankruptcy Group 3 Lincoln Center	When was the debt incurred?		
	Oakbrook Terrace, IL 60181  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	As of the date you me, the stain is. One of all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims		
	No	□ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify notice only		
	Yes			
4.1	Crusader Clinic	Last 4 digits of account number	\$1,267.00	
	Nonpriority Creditor's Name			
	Rockford Mercantile 2502 S. Alpine Rd Rockford, IL 61108	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	$\square$ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts		
	■ No			
	☐ Yes	Other. Specify medical		

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Debte Debte	or 1 Antonio V Cole or 2 Latoya D Cole	Case number (if know)				
4.1 3	Crusader Clinic	Last 4 digits of account number	\$0.00			
5	Nonpriority Creditor's Name 1200 W State St.	When was the debt incurred?	·			
	Rockford, IL 61102  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Contingent ☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	_	☐ Student loans				
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not				
	•	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts				
	■ No					
	Yes	Other. Specify notice only				
4.1 4	Dr. Sexson	Last 4 digits of account number	\$1,384.00			
	Nonpriority Creditor's Name Receivable Recovery Service LLC 110 Veterans Memorial Blvd Ste 445					
	Metairie, LA 70005  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
		☐ Student loans				
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify dental				
4.1	Illinois Title Loans	Last 4 digits of account number	\$528.00			
5	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ020.00			
	Plaza Services LLC 110 Hammond Dr. #110	When was the debt incurred?				
	Atlanta, GA 30328  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok all that apply				
	Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	_				
	Debtor 1 and Debtor 2 only	☐ Unliquidated				
	_	☐ Disputed  Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another	☐ Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	_					
	☐ Yes	Other. Specify loan				

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Debtor 1 Antonio V Cole

Debtor 2 Latoya D Cole		Case number (if know)	Case number (if know)			
4.1	Integrated Homecare Services	Last 4 digits of account number	\$145.00			
	Nonpriority Creditor's Name Rockford Mercantile 2502 S Alpine Rd Rockford, IL 61108	When was the debt incurred?				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify medical				
4.1	Manage Haalth		<b>*</b> 400.00			
7	Mercy Health Nonpriority Creditor's Name	Last 4 digits of account number	\$402.00			
	Creditors Protection Service PO Box 4115 Rockford, IL 61101	ditors Protection Service When was the debt incurred?  Box 4115				
	Number Street City State Zlp Code					
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only		☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	Debts to pension or profit-sharing plans, and other similar debts				
	□ Yes	Other. Specify medical				
	165	Other. Specify				
4.1	Mutual Management Services	Last 4 digits of account number	\$0.00			
	Nonpriority Creditor's Name  James C Thompson 515 N Court St.	When was the debt incurred?				
	Rockford, IL 61103  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	As of the date you me, the stain is. One of all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other. Specify notice only				

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Debtor 2	Antonio V Cole Latoya D Cole	Case number (if know)	
9	OSF St Anthony Medical Center	Last 4 digits of account number	\$666.00
	Nonpriority Creditor's Name Rockford Mercantile 2502 S. Alpine Rd Rockford, IL 61108	When was the debt incurred?	
-	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical	
٠ ١	OSF St Anthony Medical Center	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name 5666 E State St Rockford, IL 61108	When was the debt incurred?	
_	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify notice only	
	Radiology Consultants of Rockford	Last 4 digits of account number	\$296.00
	Nonpriority Creditor's Name ATG Credit LLC 1700 W Cortland St. #2	When was the debt incurred?	
_	Chicago, IL 60622 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify medical	

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Debto Debto	or 1 Antonio V Cole or 2 Latoya D Cole	Case number (if know)	
4.2	Rockford Health System	Last 4 digits of account number	\$900.00
	Nonpriority Creditor's Name Rockford Mercantile PO Box 5847 Rockford II 64425	When was the debt incurred?	
	Rockford, IL 61125  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify medical	
4.2	Security Finance	Last 4 digits of account number 1644	\$696.00
	Nonpriority Creditor's Name Sfc Centralized Bankruptcy Po Box 1893 Sporton burg SC 20204	When was the debt incurred?	
	Spartanburg, SC 29304  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Unsecured loan	
4.2 4	Seventh Avenue	Last 4 digits of account number	\$101.00
	Nonpriority Creditor's Name Seventh Avenue, Inc 1112 7th Ave	When was the debt incurred?	
	Monroe, WI 53566  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Charge Account	

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Debt Debt	or 1 Antonio V Cole or 2 Latoya D Cole	Case number (if know)		
4.2 5	Swedish American Hospital	Last 4 digits of account number	\$4,561.00	
	Nonpriority Creditor's Name Mutual Management Service 7177 Crimson Ridge Dr. #10 Rockford, IL 61107	When was the debt incurred?		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify medical		
4.2 6	Swedish American Hospital	Last 4 digits of account number	\$0.00	
<u> </u>	Nonpriority Creditor's Name  1401 E State St.	When was the debt incurred?		
	Rockford, IL 61108  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify notice only		
4.2 7	Swedish American MSO	Last 4 digits of account number	\$896.00	
	Nonpriority Creditor's Name Mutual Management Serv 7177 Crimson Ridge Dr. #10 Rockford, IL 61107	When was the debt incurred?		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	□ Outions		
	Debtor 2 only	☐ Contingent		
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed		
	■ Debtor I and Debtor 2 only  ■ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	□ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	☐Yes	■ Other. Specify medical		

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r 2 Latoya D Cole Case number (if know)		
Thomas T. Chung, DDS	Last 4 digits of account number	\$1,181.0
Nonpriority Creditor's Name Creditors Protection Service PO Box 4115	When was the debt incurred?	
Rockford, IL 61101	_	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify dental	
Unitd Auto Credit	Last 4 digits of account number	\$8,562.0
Nonpriority Creditor's Name PO Box 163049	When was the debt incurred?	
Fort Worth, TX 76161  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	no or the date you may the stain to. Oncor all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify deficiency from repossession of vehicle	
Unitd Auto Credit	Last 4 digits of account number	\$0.0
Nonpriority Creditor's Name		ΨΟ.
Adler & Associates 25 E.Washington St.	When was the debt incurred?	
Chicago, IL 60602  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	- "'	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify notice only	

Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 1	Antonio V Cole		
Debtor 2	Latoya D Cole	Case number (if know)	

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	1,419.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	1,419.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.		6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	33,158.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	33,158.00

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		Docume	IIL I AUC JZ UI UI					
Fill in this information to identify your case:								
Debtor 1	Antonio V Cole							
	First Name	Middle Name	Last Name					
Debtor 2	Latoya D Cole							
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS					
Case number (if known)				Check if this is a				

### Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the c er, Street, City, State and ZIP Co	ontract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					
2.0	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5			<u> </u>		
	Name				_
	Number	Street			
	City		State	ZIP Code	_

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Fill in Abia	information to identify your	Docume	nt Page 33 o	01.01	
riii in this	s information to identify your	case:			
Debtor 1	Antonio V Cole				
	First Name	Middle Name	Last Name		
Debtor 2	Latoya D Cole				
(Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case num	ber				
(if known)					☐ Check if this is an
					amended filing
Officia	l Form 106H				
Scher	dule H: Your Cod	ehtors			12/15
Jene	daic II. Tour ood	CDIOIS			12/13
our name	e and case number (if known) you have any codebtors? (If	. Answer every question			o of any Additional Pages, write
■ No					
☐ Yes	S				
Arizor 	thin the last 8 years, have you ha, California, Idaho, Louisiana, Go to line 3.				v states and territories include
☐ Yes	s. Did your spouse, former spo	use, or legal equivalent live	with you at the time?		
in line Form	e 2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make s	sure you have listed th	g with you. List the person shown le creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D, line	<u> </u>
<u> </u>	Name			_ □ Schedule E/F, li	
				☐ Schedule G, line	
					<u> </u>
	Number Street	Ctata	ZID Codo		
	City	State	ZIP Code		
				<b>D</b> • • • • •	
3.2	Name			_ Schedule D, line	
	Ivaino			☐ Schedule E/F, li	<del></del>
				☐ Schedule G. line	۵

Street

State

Number

City

ZIP Code

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Fill in this informa	tion to identify your case:	
Debtor 1	Antonio V Cole	
Debtor 2 (Spouse, if filing)	Latoya D Cole	
United States Bar	nkruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	
Case number (If known)		Check if this is:
		A supplement showing postpetition chapter 13 income as of the following date:
Official Fo	orm 106I	MM / DD/ YYYY
Schedule	I: Your Income	12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for

supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment nformation.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed	Employed
		□ Not employed	☐ Not employed
	Occupation	Case Manager	Homeless intake specialist
Include part-time, seasonal, or self-employed work.	Employer's name	Stepping Stones	Crusader Clinic
Occupation may include student or homemaker, if it applies.	Employer's address	706 N Main St Rockford, IL 61103	1200 W. State St. Rockford, IL 61102
	How long employed ti	here? 10 yrs	18 yrs

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

0.00

non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 2.738.00 2,332.00 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 +\$ Calculate gross Income. Add line 2 + line 3. 2,738.00 2,332.00

Official Form 106I Schedule I: Your Income page 1

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	tor 1 tor 2	Antonio V Cole Latoya D Cole	-	Case	number (if known)			
0		by line 4 here	4.	For Debtor 1			ebtor 2 or ling spouse	
	COL	y line 4 nere	٦.	Ψ_	2,738.00	Ψ	2,332.00	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	611.00	\$	429.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	172.00	\$	94.00	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$	48.00	
	5e.	Insurance	5e.	\$_	185.00	\$	2.00	
	5f.	Domestic support obligations	5f.	\$_	300.00	\$	0.00	
	5g.	Union dues	5g.	\$_	0.00	\$	0.00	
	5h.	Other deductions. Specify: URM	5h.+	\$_		+ \$	0.00	
		Foundation	_	\$_	0.00	\$	4.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	1,289.00	\$	577.00	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	1,449.00	\$	1,755.00	
8.	8b. 8c. 8d. 8e. 8f. 8g. 8h.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income  Other monthly income. Specify:  Employment Add'l income	8c. 8d. 8e.	\$_ \$_ \$_ \$_	0.00 0.00 0.00 0.00 0.00 0.00 270.00	\$ \$ \$ \$ + \$	0.00 0.00 0.00 0.00 0.00 0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	270.00	\$	0.00	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		1,719.00 + \$_	1,75	5.00 = \$	3,474.00
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a cify:	depend		•		nedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies					12. \$ <b>Combine</b>	3,474.00 ed
13.	Do y	you expect an increase or decrease within the year after you file this form No.  Yes Explain:	?				monthly	

Official Form 106I Schedule I: Your Income page 2

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						_		
Fill	in this informa	tion to identify y	our case:					
Deb	otor 1	Antonio V C	ole			Chec	k if this is:	
	botor 2 Latoya D Cole souse, if filing)				<ul> <li>☐ An amended filing</li> <li>☐ A supplement showing postpetition chapter</li> <li>13 expenses as of the following date:</li> </ul>			
` '	, 0,					_	•	
Unit	ted States Bankı	ruptcy Court for the	: NORTI	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
1	se number known)							
0	fficial Fo	rm 106J						
S	chedule	J: Your	Exper	nses				12/15
Be	as complete ormation. If m	and accurate as	s possible eded, atta	. If two married people ar ach another sheet to this				
Par		ribe Your House	ehold					
1.	Is this a joir							
	□ No. Go to							
			in a separ	ate household?				
	■ N □ Y		st file Offic	ial Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debt	or 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state dependents	state the dents names. minor child			5	□ No ■ Yes		
								□ No
					adult child		21	■ Yes □ No
								⊔ No □ Yes
								□ No
								☐ Yes
3.	expenses o	penses include of people other to d your depende	han _	l No l Yes				
Est	timate your ex	a date after the	our bankr	ly Expenses uptcy filing date unless y sy is filed. If this is a supp				
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i> \			Your exp	enses
4.		or home owners		nses for your residence. I or lot.	nclude first mortgag	e 4. \$		490.00
	If not include	ded in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
		erty, homeowner'	s, or renter	r's insurance		4b. \$		0.00
	•	•		upkeep expenses		4c. \$		50.00
_		owner's associa				4d. \$		0.00
5.	Additional i	mortgage paym	ents for y	<mark>our residence,</mark> such as ho	me equity loans	5. \$		0.00

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	Antonio V Cole Latoya D Cole	ase num	ber (if known)	
-	<del>_</del>			
6. Utilitie	<del> ·</del>	0-	Φ.	450.00
	Electricity, heat, natural gas	6a.	\$	150.00
	Water, sewer, garbage collection	6b.	\$	50.00
	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
	Other. Specify: cell phone	6d.	\$	100.00
_	internet		\$	45.00
_	net flix	_	\$	10.00
Food	and housekeeping supplies	7.	\$	500.00
Childe	care and children's education costs	8.	\$	400.00
Clothi	ng, laundry, and dry cleaning	9.	\$	50.00
. Perso	nal care products and services	10.	\$	50.00
. Medic	al and dental expenses	11.	\$	100.00
	portation. Include gas, maintenance, bus or train fare.		· -	
	t include car payments.	12.	\$	250.00
	ainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	able contributions and religious donations	14.	\$	0.00
. Insura	<u> </u>		·	
	t include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
15b.	Health insurance	15b.	\$	0.00
15c.	Vehicle insurance	15c.	\$	150.00
	Other insurance. Specify:	15d.	\$	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.	_ ''	<u> </u>	0.00
Specif		16.	\$	0.00
	Car payments for Vehicle 1	17a.	\$	400.00
	Car payments for Vehicle 2	17b.	· -	400.00
	• •			
	Other. Specify:	_ 17c.	\$	0.00
	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report as	18.	¢	0.00
	eted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	10.		
	payments you make to support others who do not live with you.	40	\$	0.00
Specif	<b>,</b>	19.		
	real property expenses not included in lines 4 or 5 of this form or on Schedu			0.00
	Mortgages on other property	20a.	·	0.00
	Real estate taxes	20b.	· · ·	0.00
	Property, homeowner's, or renter's insurance	20c.		0.00
	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e.	Homeowner's association or condominium dues	20e.	\$	0.00
. Other	Specify:	21.	+\$	0.00
0-1				
	late your monthly expenses			2 42 - 22
	dd lines 4 through 21.		\$	3,195.00
22b. C	copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. A	dd line 22a and 22b. The result is your monthly expenses.		\$	3,195.00
3. Calcu	late your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,474.00
	Copy your monthly expenses from line 22c above.	23b.	-\$	3,195.00
		_00.	*	3,100.00
230	Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	279.00
	count to your monthly not moonto.		L	
For exa	u expect an increase or decrease in your expenses within the year after you ample, do you expect to finish paying for your car loan within the year or do you expect your mation to the terms of your mortgage?			e or decrease because of a
■ No				
☐ Ye	Explain here:			

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Fill in this info	rmation to identify your	case:			
Debtor 1	Antonio V Cole				
20010.	First Name	Middle Name	Las	et Name	
Debtor 2	Latoya D Cole				
(Spouse if, filing)	First Name	Middle Name	Las	st Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINO	IS	
Case number					
(if known)					☐ Check if this is an
					amended filing
Official For	m 106Dec				
		n Individual	Debt	or's Schedules	12/15
Declara	tion About 6	- IIIaiviaaai	DCDU	or 3 octricadies	12/13
obtaining mone		n connection with a bank		ed schedules. Making a false sta e can result in fines up to \$250,0	tement, concealing property, or 00, or imprisonment for up to 20
Sig	gn Below				
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help	you fill out bankruptcy forms?	
■ No					
☐ Yes.	Name of person				nkruptcy Petition Preparer's Notice,
				Declaratio	n, and Signature (Official Form 119)
•	alty of perjury, I declare re true and correct.	that I have read the sum	mary and s	chedules filed with this declarat	ion and
X /s/ An	tonio V Cole		X	/s/ Latoya D Cole	
	nio V Cole		<del></del>	Latoya D Cole	
Signatu	ure of Debtor 1			Signature of Debtor 2	

Date July 24, 2017

Date July 24, 2017

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Fill i	n this inforn	nation to identify you	r case:			
Debt	or 1	Antonio V Cole				
	_	First Name	Middle Name	Last Name		
Debte (Spous	or 2 se if, filing)	Latoya D Cole First Name	Middle Name	Last Name		
Unite	ed States Ba	nkruptcy Court for the:	NORTHERN DISTRICT (	DF ILLINOIS		
Case (if know	e number wn)				_	Check if this is an amended filing
	icial Fo tement		Affairs for Individ	duals Filing for B	ankruptcy	4/10
inforr numb	mation. If moer (if know)	ore space is needed, n). Answer every que	attach a separate sheet to stion.	this form. On the top of an	equally responsible for sup y additional pages, write you	
Part			arital Status and Where You	I Lived Before		
i. v	wnat is you	r current marital statu	IS?			
[ [	■ Married □ Not mar	ried				
2. [	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
İ	■ No	t all of the places you	ived in the last 3 years. Do no	ot include where you live now	,	
٠		, ,	ŕ	ŕ		
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	Idress:	Dates Debtor 2 lived there
					nity property state or territor ico, Texas, Washington and V	
ı	No					
[	☐ Yes. Ma	ake sure you fill out Sci	hedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Explai	n the Sources of You	r Income			
F	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part		ndar years?
Г	□ No					
i		in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	ast calenda uary 1 to De	r year: ecember 31, 2016)	■ Wages, commissions, bonuses, tips	\$31,509.00	■ Wages, commissions, bonuses, tips	\$29,233.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Antonio V Cole

Debtor 1 Debtor 2	Antonio V Cole Latoya D Cole			Cas	e number ( <i>if known</i> )		
		Debtor	4		Dobtor 2		
		Source	es of income all that apply.	Gross income (before deductions and exclusions)	Sources of inc		Gross income (before deductions and exclusions)
	alendar year before 1 to December 31,		ges, commissions, es, tips	\$30,509.00	■ Wages, conbonuses, tips	nmissions,	\$30,054.00
		□Оре	rating a business		☐ Operating a	business	
Includand of winni	de income regardles other public benefit p ings. If you are filing	s of whether that in ayments; pensions a joint case and yo	come is taxable. Exa ; rental income; inter u have income that y	previous calendar years? amples of other income are a est; dividends; money collect you received together, list it of tely. Do not include income to	ted from lawsuits; only once under D	royalties; and ebtor 1.	
	Yes. Fill in the detail	S.					
		Debtor	1		Debtor 2		
			s of income e below.	Gross income from each source (before deductions and exclusions)	Sources of ind Describe below		Gross income (before deductions and exclusions)
	calendar year:  1 to December 31,		ment Income	\$2,315.00			
	calendar year before 1 to December 31,		ment Income	\$2,030.00			
_	either Debtor 1's or No. Neither Debtor individual prim	Debtor 2's debts or 1 nor Debtor 2 parily for a persona	has primarily consul, family, or househol	r debts? Imer debts. Consumer debt			(8) as "incurred by an
	_ `	o to line 7.	ca for barikraptcy, ar	a you pay any creditor a tota	1 οι ψο, 425 οι πιο	ло:	
	☐ Yes Li	st below each cred aid that creditor. Do ot include payment	o not include paymer s to an attorney for th	d a total of \$6,425* or more in the for domestic support oblication is bankruptcy case. In a safter that for cases filed on	ations, such as cl	hild support a	
-	Yes. <b>Debtor 1 or D</b> During the 90			imer debts. d you pay any creditor a tota	I of \$600 or more	?	
	□ <sub>No.</sub> G	o to line 7.					
	■ Yes Li in		r domestic support o	d a total of \$600 or more and bligations, such as child sup			
Cred	ditor's Name and A	ddress	Dates of payme	nt Total amount	Amount you still owe	Was this p	ayment for
Alp	ine Bank		May June July 2017	<u> </u>	\$71,000.00	■ Mortgag □ Car □ Credit C □ Loan Re	ard

☐ Other\_\_

Case 17-81711 Doc 1 Filed 07/24/17 Entered 07/24/17 15:09:40 Desc Main Document Page 41 of 61 Debtor 1 **Antonio V Cole** Debtor 2 Latoya D Cole Case number (if known) Creditor's Name and Address Amount you **Dates of payment Total amount** Was this payment for ... still owe paid **Elite Motors** May June July \$1,200.00 \$12,000.00 □ Mortgage 2017 Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors Other **Elite Motors July 2017** \$400.00 \$15,000.00 ■ Mortgage ■ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors □ Other Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Insider's Name and Address **Dates of payment Total amount** Amount you Reason for this payment paid still owe 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. 

No

Yes. Fill in the details.

Case title Status of the case Nature of the case Court or agency Case number Citizens Finance vs Latoya D collection Winnebago County □ Pending **Porchia** □ On appeal 17-SC-752 Concluded

Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.

П No. Go to line 11.

Yes. Fill in the information below.

Value of the **Creditor Name and Address** Describe the Property Date property **Explain what happened** 

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Debtor 1 **Antonio V Cole** Debtor 2 Latoya D Cole Case number (if known) **Creditor Name and Address** Value of the **Describe the Property** Date property Explain what happened Citizens Finance wages garnished May June July \$858.00 2017 ☐ Property was repossessed. □ Property was foreclosed. Property was garnished. ☐ Property was attached, seized or levied. Citizens Finance 12/2016 2009 Dodge Journey Unknown Property was repossessed. ☐ Property was foreclosed. Property was garnished. ☐ Property was attached, seized or levied. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? Nο Yes List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. П Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details.

Describe the property you lost and how the loss occurred

Describe any insurance coverage for the loss

Include the amount that insurance has paid. List pending insurance claims on line 33 of *Schedule A/B: Property.* 

Date of your loss

Value of property lost

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Debtor 1 Antonio V Cole Debtor 2 Latoya D Cole

Case number (if known)

Pai	t 7: List Certain Payments or Transfers					
16.	Within 1 year before you filed for bankrupto consulted about seeking bankruptcy or pre Include any attorneys, bankruptcy petition prep	paring a bankruptcy p	etition?			erty to anyone you
	□ No					
	Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address	Description and transferred	value of any property	′	Date payment or transfer was	Amount of payment
	Person Who Made the Payment, if Not You				made	
	Dennis L Leahy One Court Place Suite 203 Rockford, IL 61101 attyleahy@yahoo.com	Attorney Fees			2017	\$1,000.00
	credit counseling				2017	\$0.00
17.	Within 1 year before you filed for bankrupto promised to help you deal with your creditor Do not include any payment or transfer that you not with your creditor No No Yes. Fill in the details.	ors or to make paymen		half pay o	r transfer any prop	erty to anyone who
	Person Who Was Paid	Description and	value of any property	,	Date payment	Amount of
	Address	transferred	value of any property		or transfer was made	payment
18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your be include both outright transfers and transfers minclude gifts and transfers that you have alread No	ousiness or financial at ade as security (such as	fairs? s the granting of a secu			
	☐ Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and property transfe	erred		any property or received or debts change	Date transfer was made
	Person's relationship to you					
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro	otcy, did you transfer a otection devices.)	any property to a self-	settled tru	st or similar device	of which you are a
	Yes. Fill in the details.	Baranin diaman di				D-1- T(
	Name of trust	Description and	value of the property	transierre	ea	Date Transfer was made
Pai	t 8: List of Certain Financial Accounts, In	struments, Safe Depos	sit Boxes, and Storage	e Units		
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso	or other financial acco	unts; certificates of de			
	No					
	Yes. Fill in the details.		_			
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account of instrument	clo	te account was sed, sold, ved, or	Last balance before closing or transfer

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Debtor 1 Antonio V Cole Debtor 2 Latoya D Cole

Case number (if known)

21.	Do you now have, or did you have within 1 year cash, or other valuables?	before you filed for bankruptcy, an	y safe deposit box or other deposito	ory for securities,	
	■ No □ Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?	
22.	Have you stored property in a storage unit or pl	ace other than your home within 1	year before you filed for bankruptcy	?	
	■ No □ Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?	
	Identify Property You Hold or Control for Son Joy Do you hold or control any property that someo		y you borrowed from, are storing for	, or hold in trust	
	No Sill in the details				
	Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value	
Par	rt 10: Give Details About Environmental Informa	,			
or	the purpose of Part 10, the following definitions	apply:			
	Environmental law means any federal, state, or toxic substances, wastes, or material into the air regulations controlling the cleanup of these substances.	ir, land, soil, surface water, ground			
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	•	aw, whether you now own, operate,	or utilize it or used	
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.				
₹ер	ort all notices, releases, and proceedings that yo	ou know about, regardless of when	they occurred.		
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	under or in violation of an environm	ental law?	
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice	
25.	Have you notified any governmental unit of any	release of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice	

Entered 07/24/17 15:09:40 Case 17-81711 Doc 1 Filed 07/24/17 Desc Main Page 45 of 61 Document Debtor 1 **Antonio V Cole** Debtor 2 Latoya D Cole Case number (if known) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. **Address** (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper **Dates business existed** 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Antonio V Cole /s/ Latoya D Cole Antonio V Cole Latoya D Cole Signature of Debtor 1 Signature of Debtor 2 Date July 24, 2017 **Date** July 24, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this infor	mation to identify your	case:		
Debtor 1	Antonio V Cole	Modella Nama	Lord Maria	
	First Name	Middle Name	Last Name	
Debtor 2	Latoya D Cole			
(Spouse if, filing)	First Name	Middle Name	Last Name	
Case number	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
(if known)				☐ Check if this is an amended filing

## Official Form 108

## Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral

What do you intend to do with the property that

Did you claim the property that Schedule Company to the Company to

	identify the creditor and the property that is collateral	secures a debt?	as exempt on Schedule C?
	Creditor's Alpine Bank & Trust Co	☐ Surrender the property.	□ No
	name:	☐ Retain the property and redeem it.	_
	Description of 219 E. Greenview Ave	Retain the property and enter into a Reaffirmation Agreement.	Yes
	property Machesney Park IL 61115 securing debt:	☐ Retain the property and [explain]:	
_	Creditor's Elite Motors	П Odeath.com.edu	□ No
	name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ NO
	Description of 2008 Saturn Outlook	Retain the property and enter into a Reaffirmation Agreement.	■ Yes
	property	☐ Retain the property and [explain]:	
	securing debt:		
	Creditor's Elite Motors	Currender the property	П №
	name:	☐ Surrender the property. ☐ Retain the property and redeem it.	<b>□</b> 170
	Description of 2010 Chevy Equinox	Retain the property and enter into a  Reaffirmation Agreement.	■ Yes
	property	Retain the property and [explain]:	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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	ebtor 1 Antonio V Cole ebtor 2 Latoya D Cole	Case number (if known)	
:	securing debt:		
	Creditor's Rockford Area Habitat for name: Humanity	☐ Surrender the property. ☐ No ☐ Retain the property and redeem it.	
ı	Description of property Machesney Park, IL 61115 securing debt:	■ Yes ■ Retain the property and enter into a  Reaffirmation Agreement. □ Retain the property and [explain]:	
For in t	tt 2: List Your Unexpired Personal Property Leases any unexpired personal property lease that you listed he information below. Do not list real estate leases. Unu may assume an unexpired personal property lease if the state of	in Schedule G: Executory Contracts and Unexpired Leases (Official Form texpired leases are leases that are still in effect; the lease period has not y the trustee does not assume it. 11 U.S.C. § 365(p)(2).	106G), fill et ended.
De	escribe your unexpired personal property leases	Will the lease be assur	ned?
De	ssor's name: escription of leased operty:	□ No	
De	ssor's name: scription of leased operty:	□ No	
Le: De	ssor's name:	☐ Yes	
Le	ssor's name:	☐ Yes	
Pro	escription of leased operty:	☐ Yes	
De	ssor's name: escription of leased operty:	□ No	
De	ssor's name: escription of leased operty:	□ No	
	ssor's name:	□ No	
	operty:	☐ Yes	
Und	der penalty of perjury, I declare that I have indicated my perty that is subject to an unexpired lease.	y intention about any property of my estate that secures a debt and any pe	ersonal
X		X /s/ Latoya D Cole	
	Antonio V Cole Signature of Debtor 1	Latoya D Cole Signature of Debtor 2	
	Date <b>July 24, 2017</b>	Date <b>July 24, 2017</b>	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Antonio V Cole
Debtor 2 Latoya D Cole Case number (if known)

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-81711 Doc 1 Filed 07/24/17 Entered 07/24/17 15:09:40 Desc Main Document Page 53 of 61

B2030 (Form 2030) (12/15)

## United States Bankruptcy Court Northern District of Illinois

In	Antonio V Cole  1 re Latoya D Cole		Case No.				
	Latoya D Cole	Debtor(s)	Chapter	7			
		OF COMPENSATION OF AFFOR	NEW EOD DE	IDEOD (C)			
	DISCLOSURE	OF COMPENSATION OF ATTOR	RNEY FOR DE	CBTOR(S)			
1.	compensation paid to me within one y	ed. Bankr. P. 2016(b), I certify that I am the attorn tear before the filing of the petition in bankruptcy, in contemplation of or in connection with the bank	or agreed to be paid	to me, for services rendered or to			
	For legal services, I have agreed	to accept	\$	1,000.00			
	Prior to the filing of this statement	nt I have received	\$	1,000.00			
	Balance Due		\$	0.00			
2.	The source of the compensation paid	o me was:					
	■ Debtor □ Other (spe	ecify):					
3.	The source of compensation to be paid	d to me is:					
	■ Debtor □ Other (spe	ecify):					
4.	■ I have not agreed to share the abo	ve-disclosed compensation with any other person	unless they are mem	bers and associates of my law firm.			
		disclosed compensation with a person or persons with a list of the names of the people sharing in the					
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	<ul> <li>b. Preparation and filing of any petitic.</li> <li>c. Representation of the debtor at the d. [Other provisions as needed]</li> <li>Negotiations with secure reaffirmation agreement</li> </ul>	ituation, and rendering advice to the debtor in dete on, schedules, statement of affairs and plan which meeting of creditors and confirmation hearing, an ed creditors to reduce to market value; exe is and applications as needed; preparation of liens on household goods.	may be required; d any adjourned hea emption planning;	rings thereof; preparation and filing of			
6.	Representation of the de	with the debtor(s), the above-disclosed fee does not include the following service: esentation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or other adversary proceeding.					
		CERTIFICATION					
this	I certify that the foregoing is a completis bankruptcy proceeding.	ete statement of any agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in			
	July 24, 2017	/s/ Dennis L Leah	у				
	Date	<b>Dennis L Leahy</b> Signature of Attorne					
		Signature of Attorne Dennis L Leahy	у				
		One Court Place S					
		Rockford, IL 6110 815 964-9600 Fa:					
		attyleahy@yahoo					
		Name of law firm					

DENNIS L. LEAHY Attorney at Law One Court Place, Suite 203 Rockford, IL 61101 815/964-9600

## CONTRACT FOR CHAPTER 7 BANKRUPTCY

CONTRACT FOR CHAPTER & BANGAS
This agreement is executed this day of Tebruard, 206.
Type of Bankruptcy: Client retains Attorney Dennis L. Leahy to file a Chapter 7 Bankruptcy.
Services Provided by Attorney: Contingent upon being paid for the services as specified below, the attorney shall provide the following legal services for the client: Preparation and filing of Chapter 7 Petition in Bankruptcy.
Fees: The base fee for the filing of the bankruptcy is \$ / 000 , plus the filing fee of \$335.00, and plus the credit report fee of \$ 50, for a total of \$ / 385, to be paid prior to filing. The amount of the filing fee may increase as determined by Congress.
Additional costs required on a case-by-case basis include: (1) Mandatory prepetition credit counseling and post-petition financial education; (2) Asset verification report (when required by attorney).
If the fees are not paid as stated above and as a result the amount of legal service to be provided by the attorney is increased, the fee shall be increased accordingly to compensate the attorney for the additional time and expense in providing the legal services.
<ol> <li>Terms of Payment:         <ol> <li>The fees shall be paid in full prior to the filing of the bankruptcy.</li> <li>Client has paid \$ as a retainer fee. This amount has been earned upon receipt by the attorney and is non-refundable.</li> </ol> </li> <li>No earned portion of any fee is refundable.</li> </ol>
Services Not provided Under the Base Fee:

Representation does not include defense of discharge or dischargeability proceedings, redemption proceedings, dismissal proceedings, reinstatement proceedings, judicial lien avoidances, post-petition amendments, relief from stay actions or other adversary proceedings or attendance at continued meeting of creditors, preparation of motion to approve reaffirmation agreements.

# Compensation for Services Not Covered Under Base Fee:

- 1. Fees for additional services shall be paid at \$250.00 per hour plus costs, when applicable.
- 2. \$75.00 for preparation and filing of each amendment to the bankruptcy.
- 3. \$75.00 for preparation and filing of motion for court approval of reaffirmation agreement and attendance at hearing if required by the court.
- 4. \$500.00 plus filing fee for motion to reopen bankruptcy.

Client understands that if the client does not pay the fees as set forth above, the attorney has no obligation to provide the services.

#### **Client Obligations:**

- 1. To pay the fees as set forth above.
- 2. To provide accurately, honestly and in a timely manner, all of the information including all documents necessary to prepare and file the bankruptcy.
- 3. To satisfy prepetition credit counseling and post-petition financial education requirements.
- 4. To keep the attorney advised of the client's address and telephone number.
- 5. To attend the 341 Meeting of Creditors and other hearings set in the case as advised by the
- 6. To provide any information requested of the client by the Bankruptcy Trustee, the US Trustee, or any other party in interest, unless the court rules that the client is not required to provide the
- 7. To respond immediately to any request of the client by the attorney or the attorney's staff.
- 8. Attorney is authorized to disburse from his Client Trust Account, when applicable, funds for payment of filing fees, costs, attorney fees and refunds.

Termination: Client may terminate this representation at any time with or without cause by notifying attorney in writing of client's desire to do so. Upon receipt of the notice to terminate representation, attorney will cease all legal work on client's behalf immediately. Client will be responsible for paying all legal fees, expenses and disbursements incurred on client's behalf in this matter until written notice of termination is received by attorney.

If client terminates the representation before the conclusion of the matter, attorney will be entitled to receive a reasonable fee for the work attorney has performed based upon the amount of time required, the complexity of the matter, the time frame within which the work was performed, the responsibility involved, as well as attorney's experience, ability, reputation, and the results obtained. This fee is in addition to any legal fees, expenses and disbursements incurred on client's behalf that has not previously been paid by client.

To the extent permitted by rules of professional responsibility and the court, attorney may terminate his representation at any time if client breaches any material term of this agreement, fails to cooperate or follow attorney's advice on a material matter, if a conflict of interest develops or is discovered, or if there exists, at any time, any fact or circumstance that would, in attorney's opinion, render attorney's continuing representation unlawful, unethical, or otherwise inappropriate.

If attorney elects to terminate representation, client will timely take all steps reasonably necessary and will cooperate as reasonably required to relieve attorney of any further obligation to perform legal services, including the execution of any documents necessary to complete attorney's withdrawal from representation. In such case, client agrees to pay for all legal services performed and any legal fees, expenses or disbursements incurred on client's behalf before the termination of representation in accordance with the provisions of this agreement.

## File Retention and Destruction:

At the conclusion of this matter, attorney will retain the bankruptcy file for a period of \_\_\_\_ attorney closes his file. At the expiration of the \_\_\_\_\_-year period, attorney will destroy this file unless client notifies attorney in writing that client wishes to take possession of the file. Attorney reserves the right to charge administrative fees and costs associated with researching, retrieving, copying and delivering such files.

Client acknowledges receipt of a copy of this agreement.

Dennis L. Leahy

.

We are a debt relief agency. We help people file for bankruptcy relief under the Bankruptcy Code.

## United States Bankruptcy Court Northern District of Illinois

In re	Antonio V Cole Latoya D Cole		Case No.			
	•	Debtor(s)	Chapter	7		
	VERIFICATION OF CREDITOR MATRIX					
		Number of Creditors:		35		
	The above-named Debtor(s) (our) knowledge.	) hereby verifies that the list of credite	ors is true and	correct to the best of my		
Date:	July 24, 2017	/s/ Antonio V Cole Antonio V Cole Signature of Debtor				
Date:	July 24, 2017	/s/ Latoya D Cole Latoya D Cole				
		Signature of Debtor				

5 Points Rentals Mutual Management Serv 7177 Crimson Ridge Dr. #10 Rockford, IL 61107

5 Points Rentals 4040 Charles Street #LL Rockford, IL 61108

5 Points Rentals Alberto Altamore 308 W State St. #420 Rockford, IL 61101

Alpine Bank & Trust Co 1700 N Alpine Rd Rockford, IL 61107

Best Property Management James C. Thompson Altamore & Associates 308 W State St. #420 Rockford, IL 61101

Best Property Management James C. Thompson 515 N Court St. Rockford, IL 61103

CBO/CV Convergent Healthcare Recovery 121 NE Jefferson St. #100 Peoria, IL 61602

Citizens Finance Barrick Switzer Long Balsley & VanEvera 6833 Stalter Dr. Rockford, IL 61108

Comcast Convergent Outsourcing, Inc. PO Box 9004 Renton, WA 98057 Comcast 4450 Kishwaukee Street Rockford, IL 61109

Commonwealth Edison CCI/Contract Callers Inc. PO Box 3000 Augusta, GA 30903

Commonwealth Edison Attn: Bankruptcy Group 3 Lincoln Center Oakbrook Terrace, IL 60181

Crusader Clinic Rockford Mercantile 2502 S. Alpine Rd Rockford, IL 61108

Crusader Clinic 1200 W State St. Rockford, IL 61102

Dr. Sexson Receivable Recovery Service LLC 110 Veterans Memorial Blvd Ste 445 Metairie, LA 70005

Elite Motors 3036 Kishwaukee St Rockford, IL 61109

Elite Motors 3036 Kishwaukee St Rockford, IL 61109

Illinois Title Loans Plaza Services LLC 110 Hammond Dr. #110 Atlanta, GA 30328

Integrated Homecare Services Rockford Mercantile 2502 S Alpine Rd Rockford, IL 61108 Mercy Health Creditors Protection Service PO Box 4115 Rockford, IL 61101

Mutual Management Services James C Thompson 515 N Court St. Rockford, IL 61103

OSF St Anthony Medical Center Rockford Mercantile 2502 S. Alpine Rd Rockford, IL 61108

OSF St Anthony Medical Center 5666 E State St Rockford, IL 61108

Radiology Consultants of Rockford ATG Credit LLC 1700 W Cortland St. #2 Chicago, IL 60622

Rockford Area Habitat for Humanity 5183 Harlem Rd Loves Park, IL 61111

Rockford Health System Rockford Mercantile PO Box 5847 Rockford, IL 61125

Security Finance Sfc Centralized Bankruptcy Po Box 1893 Spartanburg, SC 29304

Seventh Avenue Seventh Avenue, Inc 1112 7th Ave Monroe, WI 53566 State of Indiana
Department of Revenue
Bankruptcy Section--MS 108
100 N Senate Ave. N240
Indianapolis, IN 46204

Swedish American Hospital Mutual Management Service 7177 Crimson Ridge Dr. #10 Rockford, IL 61107

Swedish American Hospital 1401 E State St. Rockford, IL 61108

Swedish American MSO Mutual Management Serv 7177 Crimson Ridge Dr. #10 Rockford, IL 61107

Thomas T. Chung, DDS Creditors Protection Service PO Box 4115 Rockford, IL 61101

Unitd Auto Credit PO Box 163049 Fort Worth, TX 76161

Unitd Auto Credit Adler & Associates 25 E.Washington St. Chicago, IL 60602